LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

To	Be	Filed	By:

L-2 LOBBYISTS (Sec. 67-6619

	(Sec. 67-6619)
Annual	∑ Se

Semi-Annual



SECRETARY OF STATE
STATE OF IDAHO

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-	-	permanent busine			Date p	repared		Period o	covered	- OF IUM			
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8	704 E	ist Pern	Sylven Con	2	7/9/07 (Mo.) (Day) (
	Boisa	Idah	83706			6 30 07							
Item 1	Totals	s of all reportal	ble expenditures made o	or incurred by Lob	byist or by	Lobbyist's Empl	oyer on behalf o	of Lobby	yist's Employ	yer.			
Reimb		xpenditure Living and Travel Lobbying Activity	*Total Amount for All Employers	Proportionate amo		outed by each emp	loyer (Identify e	mployer	s, under				
	Not Have to b		All Elliployers	Employer No.	1	Employer No. 2	Employer N	o. 3	Employer	No. 4			
Enterta Food a	inment nd Refreshm	ent	\$	\$	\$_		\$		\$				
Living	Accommoda	tions			_				***************************************				
Adverti	sing												
Travel				****						**************			
Telepho	one				_								
Other E	Expenses or S	Services		***************************************									
		Total	\$	s	s		\$		\$				
			u are reporting for require							on Page 1.			
Item 2	Date	or each expend	Place) for a legislator, other holder of public office, and executive officials. Amount Names of Legislators, Public and Executive Officials in Group								
		Ø	/										
	ontinued on	attached page(s)			Item								
		INST	TRUCTIONS		3	<u>L</u>	nployer(s) Name(s						
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Annual report is due on January 31st. Executive Lobbist semi-annual report due July 31st.					No. 1	1,0, Bax 1 1,0, Bax 1 1,0, Bax 1 1,0, Bax 3 1,0, Bax 3 1,0, Bax 3	59 Idol 6 mp Ex 59 Idol	3715 (Q.c.	~12 83501				
ТО	BE FILED V		en Ysursa		No. 3	American 6000 Ans		LV2		D.			
		Secr	etary of State			Madison	Wiscon		5378	3			
	Pho	Boise,	Box 83720 ID 83720-0080 2852 Fax: (208) 334-2	282		~ ~	casualt	1	insuraus	Associan			
	1 1101	10. (200) 334-2	.002 1 an. (200) 334-2	202		Des Plai	nes I	~ CC,	nois 6	8100			

Item 4					r in the nature of contributions or for or on behalf of any Legislate		ey or other tangible or intangible lic or Executive Official.						
•	Date	Amount	*****	me of Legislator, Public or Executive Official Receiving or Benefiting									
Item 5	or House B		ion, the number of the Senate legislative activity in which		LEGISLATIVE SUB	JECT	IDENTIFICATION						
Subject			Appropriation Bill Number	Code 01	Subject Agriculture, horticulture,	Code 17	Subject Health service, medicine, drugs						
(from t	table) Legi	islative Ident. Number	and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15	farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29	and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)						
					ERTIFICATION: I hereby certify the rrect statement in accordance with S								
	Identify	any rule, ratemaking d	ecision procurement		Morga U. Roll	8	7/9/07						
Item 6	contract b		ncial services agreement or	Lo	obbyist signature	(Date						
				Em	nployer No. 1 signature		Date						
	Z			Em	nployer No. 2 signature		Date						
				Em	pployer No. 3 signature		Date						
				Em	ployer No. 4 signature		Date						

LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

Го	Be	Filed	By:

L-2 LOBBYISTS (Sec. 67-6619)

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Page____of___Page(s)
THIS SPACE FOR OFFICE USE ONLY

STATE OF IDAHO

	⅃ Annual	⊠ Semi-Annual
(Type or print clearly in black ink)		

See instructions at bottom of page

Lobbyist's name and permanent business address

Morgan W. Richards In Morgan Wear ending

804 Fost Pennsylvania Cara

Boisa, Idaba 83706

Date prepared

Period covered

year ending

(Mo.) (Day) (Yr.)

Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer

1 Totals of all reporta-	Totals of all reportable experientiales made of incurred by Loody ist of by Loody ist s Employer on behalf of Loody ist s Employer.												
Category of Expenditure Reimbursed Personal Living and Travel	*Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)											
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	All Employers	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4								
Entertainment Food and Refreshment	\$ 9.00	\$	s	\$	s <u>9.00</u>								
Living Accommodations													
Advertising													
Travel													
Telephone													
Other Expenses or Services													
Total	s <u>9.00</u>	s	s	\$	s 9.00								

*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1.

Item	The totals of	of each expenditure of more than fifty dollars (\$50)	50) for a legislator, other holder of public office, and executive officials.							
2	Date	Place	Amount	Names of Legislators, Public and Executive Officials in Group						
		P								

Continued on attached page(s)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. 1	Spectrus Group LLC 12426 W. Explorer Drue #220 Boise, Idea 83713
Filing deadline: Annual report is due on January 31st. Executive Lobbist semi-annual report due July 31st.	No. 2	Idalo Insuran Guerant Associati 1720 Bellaire Street #408 Penver Glorado 80222
TO BE FILED WITH: Ben Ysursa Secretary of State	No. 3	Surplus Line Association 595 5. 1446 Street
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No. 4	Idon Board of Prof Engineer + Sur 5535 W. Overland Boiso Idone 83705

Item 4	personal prop		, Public or Executive Of	employer in the nature of contributions of money or other tangible or intangible official or for or on behalf of any Legislator, Public or Executive Official.								
	Date	Amount	Nam	ne of L	egislator, Public or Executive Offic	ial Rec	eiving or Benefiting					
Item			the number of the Senate		LEGISLATIVE SUB	JECT	IDENTIFICATION					
5		, Resolution or other legi was supporting or oppos	islative activity in which ing.	Code	Subject	Code	Subject					
Subject (from	table) Legisla		propriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	17 18 19 20 21 22 23 24 25 26 27 28 29 30	Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)					
					ERTIFICATION: I hereby certify the prect statement in accordance with So	ection 6						
Item 6	contract bid	y rule, ratemaking decis or bid process, financia of was supporting or opp	l services agreement or	Lo	obbyist signature	- /	Date					
	6			En	nployer No. 1 signature		Date					
	4			En	nployer No. 2 signature		Date					
				En	nployer No. 3 signature		Date					
				En	nployer No. 4 signature		Date					



State of Idaho

Ben Ysursa Secretary of State

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To Be Filed By:

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(Type or print clearly in black ink) See instructions at bottom of page		SECRETARY OF STATE
Lobbyist's name and permanent business address	Date prepared	Petiod covered DAHO
Morgan W. Richards Jr. 804 E. Pennsylvania Lane	€7/9/07	year ending (Mo.) (Day) (Yr.)
Boise, Idolo 83706		6 30 07

Item 1	Totals of all reportab	ble expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.						
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		*Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)					
		All Employers	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4		
Entertair Food and	nment d Refreshment	s <u>12.00</u>	\$	\$	s 12.00	s		
Living A	ccommodations							
Advertis	ing							
Travel								
Telephor	ne		***************************************					
Other Ex	xpenses or Services							
	Total	\$ T5.00	s	s	s <u>12.00</u>	s		

*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1.

Item	The totals of	of each expenditure of more than fifty dollars (\$50	dollars (\$50) for a legislator, other holder of public office, and executive officials.				
2	Date	Place	Amount	Names of Legislators, Public and Executive Officials in Group			
		Þ					

Continued on attached page(s)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. 1	Willamette Dental of Idalo 6950 NE compos Way 97124
Filing deadline: Annual report is due on January 31st. Executive Lobbist semi-annual report due July 31st.	No. 2	Blue Cross of Idolo P.O. BOX 7408 Boiss, Idolo 83707
TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080	No. 3	Interspectar Hospital 303 Allembough Street Boise Idays 83704

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contri personal property to any Legislator, Public or Executive Official or for or on behalf of any					or for or on behalf of any Legislato	Legislator, Public or Executive Official.		
Item 5	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.		LEGISLATIVE SUBJECT IDENTIFICATION Code Subject Code Subject						
-		Bill, Resolution or (1 ' ' '	riation Bill Number	01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, heal	
16		egislative Ident. No		Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29 30	insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, minin and mining products Public lands, parks, recreation Social insurance, unemploymer insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
						ERTIFICATION: I hereby certify the orrect statement in accordance with S			
Item 6	contra	fy any rule, ratema ct bid or bid proces obbyist was support	ss, financial ser	vices agreement or	L	obbyist signature	8	Date	
		4			Er	nployer No. 1 signature		Date	
		Ø			Er	nployer No. 2 signature		Date	
					Er	nployer No. 3 signature		Date	
					 Fr	nployer No. 4 signature		Date	